## PATENT APPLICATION FEE DETERMINATION RECORD Effective October 1, 2003

Application or Docket Number

10684607

| CLAIMS AS FILED - PART I (Column 1) (Column 2)   |  |   |               |                                      |              |                  |      | SMALL ENTITY |                        |         | OTHER THAN          |                        |  |
|--|--|---|---------------|--------------------------------------|--------------|------------------|------|--------------|------------------------|---------|---------------------|------------------------|--|
| TOTAL CLAIMS   |  |   | (Column 1)    |                                      | (Con         | ımn 2)           | 1    | TYPE         |                        | OR      |                     | ENTITY                 |  |
|  |  |   | 10            |                                      |              |                  |      | RATE         | FEE                    | -       | RATE                | FEE                    |  |
| FOR  |  |   | NUMBER FILED  |                                      | NUMI         | BER EXTRA        |      | BASIC FE     | E 385.00               | OR      | BASIC FEE           | 770.00                 |  |
| TOTAL CHARGEABLE CLAIMS  |  |   | / mi          | nus 20=                              | • (          | 0                |      | X\$ 9=       |                        | OR      | X\$18=              |                        |  |
| INDEPENDENT CLAIMS   |  |   | minus 3 =     |                                      |              | 0                |      | X43=         |                        | OR      | X86=                |                        |  |
| M  | JLTIPLE DEPE                                   | NDENT CLAIM P                             | RESENT        |                                      |              |                  |      | +145=        |                        | OR      | +290=               |                        |  |
| * If the difference in column 1 is less than zero, enter "0" in column 2   |  |   |               |                                      |              |                  |      | TOTAL        | 385                    | OR      | TOTAL               |                        |  |
| CLAIMS AS AMENDED - PART II (Column 1) (Column 2) (Column 3)   |  |   |               |                                      |              |                  |      | SMALL        | ENTITY                 | OR      | OTHER<br>SMALL      |                        |  |
| AMENDMENT A  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHI<br>NUME<br>PREVIO<br>PAID F    | BER<br>JUSLY | PRESENT<br>EXTRA |      | RATE         | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | . /3                                      | Minus         | - 6                                  | 20           | =                |      | X\$ 9=       |                        | OR      | X\$18=              |                        |  |
|  | Independent                                    | * 4                                       | Minus         | ###                                  | <u>3</u>     | * /              |      | X43=         | 43                     | OR      | X86=                | ·                      |  |
| <u> </u>   | FIRST FILSC                                    | NATION OF WA                              | DETIFIE DE    | TIPLE DEPENDENT CLAIM                |              |                  |      | +145=        |                        | OR      | +290=               |                        |  |
|  |  |   |               |                                      |              |                  |      | TOTAL        | 43                     | OR      | TOTAL<br>ADDIT, FEE |                        |  |
| (Column 1) (Column 2) (Column 3)   |  |   |               |                                      |              |                  |      |              | •                      |         |                     |                        |  |
| AMENDMENT B  |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |               | HIGHE<br>NUMB<br>PREVIO<br>PAID F    | ER<br>USLY   | PRESENT<br>EXTRA |      | RATE         | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | ,   | Minus         | **                                   |              | 2                |      | X\$ 9=       |                        | OR      | X\$18=              | •                      |  |
|  | Independent                                    | +   | Minus         | ***                                  | 01.4114      | =                |      | X43=         |                        | OR      | X86=                |                        |  |
|  | rino i Priese                                  | NTATION OF MU                             | LIPLE DEF     | ENDENT                               |              | <u>. L.</u>      |      | +145=        | ·                      | OR      | +290=               |                        |  |
|  |  |   |               |                                      |              |                  |      |              |                        | OR ,    | TOTAL<br>ODIT, FEE  |                        |  |
| ADDIT, FEE ADDIT, FEE ADDIT, FEE ADDIT, FEE ADDIT, FEE ADDIT, FEE  |  |   |               |                                      |              |                  |      |              |                        |         |                     |                        |  |
| 51   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | ·             | HIGHE<br>NUMBI<br>PREVIOL<br>PAID FO | ER<br>JSLY   | PRESENT<br>EXTRA |      | RATE         | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|  | Total  | •   | Minus         | **                                   |              | •                |      | X\$ 9=       |                        | OR      | X\$18=              |                        |  |
|  |  |   | Minus         | ***                                  |              | 2                | t    | X43=         |                        |         | X86=                |                        |  |
| 3  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |               |                                      |              |                  | ·  - | 740-         |                        | OR      |                     |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." |  |   |               |                                      |              |                  |      |              |                        |         |                     |                        |  |
| Ť  | he *Highest Numb                               | per Previously Paid                       | For (Total or | independen                           | t) is the    | highest number   | foun | d in the app | ropriate box           | in colu | mn 1.<br>·          |                        |  |